

FINAL INSPECTION REPORT Under the Retirement Homes Act, 2010

Inspection Information

Date of Inspection: February 3, 2023 Name of Inspector: Douglas Crust

Inspection Type: Routine Inspection

Licensee: RSH Clarkson Facility Inc. / 22 St. Clair Avenue, Toronto, ON M4T 2S3 (the "Licensee")

Retirement Home: Walden Circle Retirement Community / 1907 Lakeshore Road, Mississauga, ON L5J 1J7

(the "home")

Licence Number: T0258

Purpose of Inspection

The RHRA conducts routine inspections as set out in section 77(3) of the *Retirement Homes Act, 2010* (the "RHA").

NON-COMPLIANCE

1. The Licensee failed to comply with O. Reg. 166/11, s. 24; Emergency plan, general.

The Licensee failed to comply with O. Reg. 166/11, s. 25; Emergency plan, retirement home with more than 10 residents.

Specifically, the Licensee failed to comply with the following subsection(s):

- 24. (5) The licensee shall,
 - (a) on an annual basis at least, test the emergency plan, including arrangements with community agencies, partner facilities and resources that will be involved in responding to an emergency, related to,
 - (iv) violent outbursts;
- 25. (3) The licensee shall ensure that the emergency plan provides for the following:
 - 3. Resources, supplies and equipment vital for the emergency response being set aside and readily available at the retirement home and regular testing of all such resources, supplies and equipment to ensure that they are in working order.

Inspection Finding

The inspector reviewed the Licensee's records of testing for their emergency plans and found that the testing for situations involving violent outbursts had not been completed in 2022. The Licensee failed to ensure that testing was done annually as required. In addition, the evidence provided indicated that the emergency kit of supplies, resources and equipment set aside for use in an emergency had not been tested since July 2021. The Licensee failed to regularly test the equipment, as prescribed.

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Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 65; Training.
 The Licensee failed to comply with O. Reg. 166/11, s. 14; Staff training.
 The Licensee failed to comply with O. Reg. 166/11, s. 27; Infection prevention and control program.

Specifically, the Licensee failed to comply with the following subsection(s):

- <u>65. (2)</u> Every licensee of a retirement home shall ensure that no staff work in the home unless they have received training in,
 - (a) the Residents' Bill of Rights;
 - (b) the licensee's policy mentioned in subsection 67 (4) to promote zero tolerance of abuse and neglect of residents;
 - (c) the protection afforded for whistle-blowing described in section 115;
 - (d) the licensee's policy mentioned in subsection 68 (3) regarding the use of personal assistance services devices for residents;
 - (f) fire prevention and safety;
- 14. (1) For the purposes of clause 65 (2) (j) of the Act, every licensee of a retirement home shall ensure that all staff who work in the home receive training in the procedure described in subsection 73 (1) of the Act for a person to complain to the licensee.
- **27. (9)** The licensee shall ensure that each staff member who works in the retirement home receives training on how to reduce the incidence of infectious disease transmission, including,
 - (a) the need for and method of maintaining proper hand hygiene and method of preventing cross contamination, including proper handling of soiled linens, the protection of uniforms, and the separation of clean and dirty items;
 - (b) the need for and process of reporting, providing surveillance of and documenting incidents of infectious illness.

Inspection Finding

The inspector reviewed a sample of six staff training records. The records showed that one staff member did not complete training prior to working in the Home, but did complete the training within three weeks of her start date. A second staff member failed to complete any training and as of the date of inspection still had not completed training in the listed areas. The Licensee failed to ensure that some staff completed all of the training prior to commencing to work in the Home as required.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

3. The Licensee failed to comply with the RHA, S.O. 2010, c. 11, s. 62; Plan of care.

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Specifically, the Licensee failed to comply with the following subsection(s):

62. (1) When a resident commences his or her residency in a retirement home, the licensee shall, within the prescribed times, ensure that the resident is assessed and that a plan of care is developed based on the assessment and in accordance with this section and the regulations.

Inspection Finding

The inspector reviewed a sample of three resident care files. The inspector found that one resident was assessed, however a plan of care was not developed for the resident. The Licensee failed to ensure that a plan of care was developed for each resident admitted to the Home within the time frame prescribed.

Outcome

At the time of the inspection, the Licensee was not in compliance. The home has since taken corrective action to achieve compliance.

NOTICE

The Final Inspection Report is being provided to the Licensee, the Registrar of the Retirement Homes Regulatory Authority (the "RHRA") and the home's Residents' Council, if any.

Section 55 of the RHA requires that the Final Inspection Report be posted in the home in a conspicuous and easily accessible location. In addition, the Licensee must ensure that copies of every Final Inspection Report from the previous two (2) years are made available in the Home, in an easily accessible location.

The Registrar's copy of the Final Inspection Report, as it appears here, will be included on the RHRA Retirement Home Database available online at http://www.rhra.ca/en/retirement-home-database.

Signature of Inspector	Date
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